

Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES) Report 2021

Introduction

Equality, diversity and inclusion are key priorities for C&I and are explicitly identified in the Trust strategy, culture framework and people plan priorities. It is widely recognised that greater diversity and inclusion improves staff experience, retention and levels of motivation and morale. It is a duty (and legal obligation) of a public sector employer in delivering their functions to have regard to the need to eliminate unlawful discrimination, harassment and victimisation prohibited by the Equality Act, to advance equality of opportunity and to foster good relationships between people who share a protected characteristic and those who do not.

A focus on equality and diversity also improves the opportunity to access a wider pool of talent and that diverse organisations outperform less diverse. For the NHS this means that staff reflects the diversity of the patients and communities it serves and that management teams reflect their workforce. There is strong evidence that where the workforce is representative of patients the levels of care and experience improves.

The NHS long-term plan highlights the need to engage and respect staff and draw from all pools of talent. The National People Plan builds on this and sets out clear expectations regarding diversity and inclusion, which has informed our local action plans. Specifically, these include:

- All staff to have a health and wellbeing conversation that includes equality, diversity and inclusion
- Overhauling the recruitment process and addressing bias in the system to ensure staffing represents the diversity of their community
- Organisations to publish progress against the model employer goals and to ensure a fair experience for all by closing the disciplinary gap
- Improved governance and use of networks, accountability, regulation and oversight
- Improved education and information

The key strategic activities to improve staff experience of equality diversity and inclusion, staff engagement and a reduction in bullying and harassment include:

- Undertaking a cultural / inclusion review that provide a detailed understanding of the staff experience
- The appointment of a senior equality and diversity inclusion leader and EDI team
- Implementing a Just culture project team linked to equality standards
- Development of the Trust equality network groups to empower their voice, contribution and levels of engagement
- Career coaching and reverse mentoring programmes that evaluate and focus on any barriers to progression
- Programme of creating our values led culture of inclusion and empowerment (Renewing of the organisational values and behaviours and embedding them across recruitment, promotion, performance and leadership)
- Review of recruitment processes and policies to support objective assessment
- Implementation of talent management and succession planning approaches that address underrepresentation in senior roles and career development more broadly

WDES Background

The WDES was introduced in 2019 and is a set of ten specific measures which enable organisations to compare the experiences of disabled and non-disabled staff, with the aim of achieving equity and being a more inclusive organisation. Having an inclusive approach to managing people and talent increases job satisfaction, which in turn improves patient care and experience. In organisations where staff feel valued and included, there are increased levels of staff satisfaction, loyalty and morale.

Monitoring the WDES data increases the level of understanding of the issues faced by disabled staff and the inequalities they experience. It helps to identify any barriers to career development. This is particularly important during Covid-19, not only as it has disproportionately affected people with an underlying disability and long-term condition, but also the potential increase in long term chronic conditions and workplace disabilities predicted. New ways of working and communicating remotely and through masks is also difficult for staff with certain disabilities.

The WDES Metrics

Metric		
	1	Percentage of staff in AfC bands compared with the percentage of staff in the overall workforce
Process	2	Relative likelihood of staff being appointed from shortlisting across all posts
	3	Relative likelihood of staff entering the formal capability process as measured by entry into a formal investigation
Cultural (staff survey indicators)	4	Percentage of disabled staff experiencing harassment bullying or abuse from relatives or public, managers or staff
	5	Percentage of disabled staff believing that the trust provides equal opportunity for career progression
	6	Percentage believing that they have felt pressure from their manager to come into work when not feeling well
	7	Percentage believing that they are satisfied with the extent to which their organisation values their work
	8	Percentage saying their employer has made adequate adjustments to enable them to carry out their work
	9	Engagement score for disabled staff and has trust taken action to facilitate the voice of disabled staff
Board Indicator	10	Percentage difference between the organisations board voting membership and the overall workforce

WDES Data Summary

Metric 1- The percentage of staff in AfC paybands or medical and dental subgroups and very senior managers (including Executive Board members) compared with the percentage of staff in the overall workforce. The data for this Metric is a snapshot as of 31 March 2021.

Total	Yes	No	N/K	Grand Total	% Disabled
Band 2	0	4	2	6	0.0%
Band 3	14	175	60	249	5.6%
Band 4	28	196	42	266	10.5%
Band 5	19	186	74	279	6.8%
Band 6	21	228	98	347	6.1%
Band 7	31	210	54	295	10.5%
Band 8 - Range A	6	97	32	135	4.4%
Band 8 - Range B	6	42	17	65	9.2%
Band 8 - Range C	0	14	3	17	0.0%
Band 8 - Range D	0	13	7	20	0.0%
Band 9	0	4	0	4	0.0%
VSM	2	12	2	16	12.5%
Consultant	1	54	26	81	1.2%
Medical Career	1	8	6	15	6.7%
Medical Trainee	3	57	3	63	4.8%
All Staff	132	1300	426	1858	7.1%

NB: Disability declared by C&I staff has increased from 4.9% in 2019 to 7.1% in 2021.

Metric 2 - Relative likelihood of Disabled staff being appointed from shortlisting

(A figure below 1.00 indicates that disabled staff are more likely than non-disabled staff to be appointed from shortlisting)

The relative likelihood of Disabled staff being appointment from shortlisting, compared to that of non-disabled staff being appointed from shortlisting across all posts improved from 0.73 to 0.42.

Metric 3 - Relative likelihood of Disabled staff entering the formal capability process

Compared to that of Non-disabled staff, as measured by entry into a formal capability procedure *(A figure above 1.00 indicates that disabled staff are more likely than non-disabled staff to enter the formal capability process)*

The relative likelihood of Disabled staff entering the formal capability to that of non-disabled increased from 0.00 to 1.97. The Employee Relations Team review process, to ensure all cases are fair, reasonable and just. This may be due, to staff being more confident in disclosing/sharing they have a disability.

Metric 4a - Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last year

(These are drawn directly from the published NHS Staff Survey site and are no longer part of our directly submitted data. They will, however, need to be included in the narrative report).

% of Disabled staff experiencing harassment, bullying or abuse from patients/service users, their relatives or other members of the public in the last 12 months, has stayed mainly static for the Trust as a whole.

For staff with a Disability, this figure rose from 41.8% to 42.2%. A slight rise for Disabled staff at 0.4% and a slight rise for non-disabled staff from 37% to 37.4%. Again, a rise of 0.4%.

	2019	2020
Disabled:	41.8%	42.2%
Non-disabled:	37%	37.4%

Metric 4b - Percentage of staff experiencing harassment, bullying or abuse from *managers*

% of Disabled staff experiencing harassment, bullying or abuse from managers in the last 12 months, has increased from 18.6% to 22.0%. This is an increase of 3.4%. This metric has decreased from 11.5% to 9.9% for non-disabled staff a decrease of 1.6%

	2019	2020
Disabled:	18.6%	22.0%
Non-disabled:	11.5%	9.9%

Metric 4c – % of staff experiencing harassment, bullying or abuse from other *colleagues* in the last 12 months.

This metric has increased from 22.8% to 24.7%. A rise of 1.9%. Non-disabled staff have stayed static.

	2019	2020
Disabled:	22.8%	24.7%
Non-disabled:	15.0%	15.0%

Metric 4d - Percentage of staff experiencing harassment, bullying or abuse at work, they or a colleague *reported* it in the last 12 months.

Significant increase this year, in reporting of this metric for both Disabled and non-disabled staff. Disabled staff have seen a rise from 51.6% to 62.3%. An increase of 10.7%. Non-disabled staff a rise from 61.1% to 61.5%. A rise of 0.4%.

	2019	2020
Disabled:	51.6%	62.3%
Non-disabled:	61.1%	61.5%

Metric 5 – Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.

This metric has decreased slightly for Disabled staff from 66.4% to 66.0%. Also, a fall in non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion. From 80.0% to 76.3%. However, 10.3% lower for Disabled staff.

	2019	2020
Disabled:	66.4%	66.0%
Non-disabled:	80.0%	76.3%

Metric 6 - Percentage of Disabled staff compared to non-disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.

This metric has stayed static for the Trust as a whole. For Disabled staff, a slight rise of 0.1%. From 26.4% to 26.5%. Non-disabled stayed the same at 17.5%. However, 9.% higher for Disabled staff.

	2019	2020
Disabled:	26.4%	26.5%
Non-disabled:	17.5%	17.5%

Metric 7 – Percentage of Disabled staff compared to Non-disabled staff saying they are satisfied with the extent to which the Trust values their work.

This metric has improved for Disabled staff from 43.2% to 45.2% in the last 12 months. A rise of 2%. For Non-disabled staff an increase from 53.8% to 55.6%. A rise of 1.8%. However, 1.4% lower for Disabled staff.

	2019	2020
Disabled:	43.2%	45.2%
Non-disabled:	53.8%	55.6%

Metric 8 – Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.

This metric has decreased from 72.8% to 70.1%. A fall of 2.7%. Anecdotal feedback from the Disability+ Carers Network informs, that many Disabled staff experienced barriers and delays to accessing laptops. In addition, adapted office furniture/aids were not delivered in a timely fashion, to Disabled staff working remotely through the pandemic. The C&I EDI Lead and the Voluntary Sector Manager (Co-Chairs of the Disability+ Carers Network), worked together during the pandemic, to arrange the delivery of aids and adaptations, from the office to home for Disabled staff.

	2019	2020
Disabled:	72.8%	70.1%
Non-disabled:	N/A	N/A

Metric 9a - The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation.

This has stayed static for the Trust as a whole. An increase of 0.1 respectively for both Disabled and non-disabled staff. **Staff engagement remains, as a key area of focus for the Trust.**

	2019	2020
Disabled:	6.8	6.9
Non-disabled:	7.2	7.3

Metric 9b - Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? (yes) or (no)

Yes

Disability+ Carers Staff Network had weekly Coffee & Chat support sessions throughout Covid Lockdown, Sunflower Lanyards introduced this year, Supporting Colleagues with LTC Guide, Workplace Adjustment Passports, 10 days Disability Leave (pro rata). Plus, C&I EDI Lead as the 'central point of contact' for disability support for both managers and staff.

Metric 10 - Percentage difference between the organisations' board membership and its overall workforce disaggregated.

Total Board members percentage by Disability is 7.14%. Overall Workforce percentage by Disability is 7.1%. The metric statistically, has no difference.

Conclusion and Next Steps 2021/22

As a result of collecting evidence to support our WDES submission, we have identified gaps in our data, alongside some areas for improvement from the National Staff Survey (March 2021). The action plan below sets out our primary work to address these areas. The plan covers the next 12 months until 31 March 2022.

Areas of focus for 2021/22:

- Declaration/sharing disability status on ESR
- Bullying, Harassment and Abuse
- Career Development/Recruitment and Retention
- Workplace/Adequate Adjustments

The action plan will be monitored by the People and Culture Programme Board for annual assessment and evaluation. In addition to the WDES Steering Group we now have the C&I NHS Staff Survey Equalities Group that has been established year, to ensure there is appropriate challenge from colleagues who do not attend the People and Culture Programme Board

Workforce Disability Equality Standard Action Plan

Metric	Areas of Action	Activity	Lead	Supporting Team Members	Timeframe	Impact/Why	NHS People Plan Theme
-	People & Culture Programme Board	<ul style="list-style-type: none"> Share WDES with data with the People & Culture Programme Board Consider the NHS England East No More Tick Boxes, with any further actions. 	EDI Head	C&I EDI Lead	Q3 – Q4	Monitor and review WDES Report and Action Plan	Health & Wellbeing (7) Prevent and tackle bullying, harassment and abuse against staff, and create a culture of civility and respect
2	Recruitment and Selection	<ul style="list-style-type: none"> Ensure Disability Confident Scheme/Guaranteed Interview Streamline Workplace Adjustments throughout the whole recruitment process and work life cycle. Embed Equality Impact Analysis throughout the Trust to monitor and review; recruitment, promotion, leavers, carers by Disability/LTCs and service change Work with local schools/colleges/universities and local Job Centre Plus, to promote C&I as a local employer of choice 	HR/OD Director	Recruitment Team/C&I EDI Lead	Q4	<p>All staff to consider their career options at C&I increasing retention</p> <p>C&I seen as an anchor institute and local employer of choice for all</p>	Equality and Diversity (1) Overhaul recruitment and promotion practices to make sure that staffing reflects the diversity of the community, and regional and national labour markets
5	Career Development Promotion and Talent Management	<ul style="list-style-type: none"> Implement Disability Career Development i.e. a programme of coaching, mentoring, EDI Lead and Staff Inclusion Networks Quarterly Staff Pulse Survey (NHS Staff Survey) Explore Calibre Leadership Programme/Explore Disability Rights UK Leadership Programme 	HR/L&OD Director	L&D/OD Team/C&I EDI Lead	Q3 – Q4	<p>Balance in the promotion, succession planning and development opportunities</p> <p>Analysis of quarterly pulse survey data and use improvement process and practice to ensure the Trust's recruitment and selection processes are inclusive to reflect the diversity of the community</p>	Equality and Diversity (1) Overhaul recruitment and promotion practices to make sure that staffing reflects the diversity of the community, and regional and national labour markets
5	Disability Confident Scheme	<ul style="list-style-type: none"> Review level 2 status Ensure consistent use throughout the Trust Appropriate training for recruiting managers Aspire to DSC Level 3 	HR/L&OD Director	L&D/OD Team/C&I EDI Lead/Wellbeing Team	Q3 – Q4	<p>Managers ensure onboarding of Disabled staff 'new starters'</p> <p>Ensure workplace adjustment are in place before 'return to work'</p> <p>Create fairness and promote within C&I culture</p>	Health and Wellbeing (20) Every member of NHS staff should have a health and wellbeing conversation
8	Workplace Adjustments/Adequate Adjustments	Undertake Health & Wellbeing Assessment - which includes the Workplace Adjustment Passport – to enable targeted interventions to support staff with disabilities/LTCs, throughout their work life cycle. Completion evidenced in ESR	HR/OD Director	L&OD Team/ Wellbeing Team/C&I EDI Lead	Q2 – Q4	<p>Appraisals that are effective and person centred</p> <p>Ensure C&I understands and meets the Health and Wellbeing needs of Disabled staff</p>	Health and Wellbeing (20) Every member of NHS staff should have a health and wellbeing conversation

7	Policies/Guides	<ul style="list-style-type: none"> Review take up and awareness campaign of flexible working policies as part of the wellbeing agenda Refresh Supporting Colleagues LTC Guide Socialise Workplace Adjustments Passports and Disability Leave by 'You Said We Did' and 'Did You Know?' Campaigns 	EDI Head	C&I EDI/QI Team/Wellbeing Team/Disability+ Carers Network/ Comms. Team	Q2 – Q4 Q2 – Q4	Inclusive key policies/guides, uptake Workplace Adjustments, flexible working and remote working for Disabled staff Managers communicate with their teams to ensure every member of their team receives the information and support they need	Health and Wellbeing (20) Every member of NHS staff should have a health and wellbeing conversation
2	Equality Impact Analysis	<ul style="list-style-type: none"> Formal launch across the Trust Update Trust intranet EqIA Guide and EqIA Form Regular EqIA Workshops for staff 	EDI Head	C&I EDI Lead/Divisional Directors/Dis+ C. Staff Network	Q3 – Q4	Improve and embed EDI throughout the Trust as a service provider and major local employer Compliance with the Public Sector Equality Duty	Equality and Diversity (1) Overhaul recruitment and promotion practices to make sure that staffing reflects the diversity of the community, and regional and national labour markets
4 a.b.c.	Staff will work in an environment free from bullying, harassment and discrimination	<ul style="list-style-type: none"> Pilot the Restorative and Just Culture in Acute Division Establish a Staff Engagement Group 	HR/OD Director & EDI Head	C&I EDI Lead/ER Team/OH Dept./FTSUG/ Staff side	Q3 – Q4	Embed person centred leadership To hold comprehensive and accurate workforce data on all protected characteristics for all staff	Equality and Diversity (1) Overhaul recruitment and promotion practices to make sure that staffing reflects the diversity of the community, and regional and national labour markets